SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

ME OF FILER (In Full) IUMANE SOCIETY LEGISLATIVE FUND			
Full Name (Last, First, Middle Initial) of Payee			Date
Elizabeth Crinion			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1513 Mass Avenue, SE			Amount
City Washington	State DC	Zip Code 20003	2.11
Purpose of Expenditure Staff Time		Category/ Type	Office Sought: House State: NM Senate X Senate District: 00
Name of Federal Candidate Supported or Oppose Steve Pearce	d by Expenditure):	President Oppose Oppose
Calendar Year-To-Date Per Election for Office Sought		.00	Disbursement For: X Primary General 2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Elizabeth Crinion			Date
Mailing Address 1513 Mass Avenue, SE			Amount
City Washington	State DC	Zip Code 20003	2.11
Purpose of Expenditure Staff Time		Category/ Type	Office Sought: X House State: NM House Senate District: 01
Name of Federal Candidate Supported or Oppose Martin Heinrich	d by Expenditure): -	President Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought		.00	Disbursement For: X Primary General 2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Elizabeth Crinion			Date Date Date Date Date Date Date Date Dat
Mailing Address 1513 Mass Avenue, SE			Amount
City Washington	State DC	Zip Code 20003	2.11
Purpose of Expenditure Staff Time		Category/ Type	Office Sought: X House State: NM House Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Darren White		President District: 01 Check One: X Support Oppose	
Calendar Year-To-Date Per Election for Office Sought		.00	Disbursement For: 2008 Other (specify) General
(a) SUBTOTAL of Itemized Independent Expenditu	ures		6.33
(b) SUBTOTALof Unitemized Independent Expendent	ditures		
(c) TOTAL Independent Expenditures	 no 7)		